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DATE:	November 30, 2005
FILE NO:	APPM/008764/FEP/OXD/AG
TO:	MAIL STOP AF
FAX NO:	571-273-8300
COMPANY:	USPTO
FROM:	Keith M. Tackett
PAGE(S) with cover:	11
ORIGINAL TO FOLLOW?	☐ YES ☒ NO

SECOND RESPONSE TO FINAL OFFICE ACTION DATED SEPTEMBER 6, 2005 AND FEE TRANSMITTAL

TITLE:	**Absorber Layer for DSA Processing**
U.S. SERIAL NO.:	**10/679,189**
FILING DATE:	**October 3, 2003**
INVENTOR:	**Autryve, et al.**
EXAMINER:	**Hsien Ming Lee**
GROUP ART UNIT:	**2823**
CONFIDENTIALITY NOTE:	**9509**

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PTO/SB/17 (12-04v2)
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT ($)400.00

Complete if Known	
Application Number	10/679,189
Filing Date	OCTOBER 3, 2003
First Named Inventor	AUTRYVE, ET AL
Examiner Name	HSIEN MING LEE
Art Unit	2823
Attorney Docket No.	APPM/008764/FEP/OXD/AG

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :

☒ Deposit Account Deposit Account Number: 50-1074/008764/RWM Deposit Account Name: Applied Materials, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES	Small Entity	SEARCH FEES	Small Entity	EXAMINATION FEES	Small Entity	
Application Type	Fee ($)	Fee($)	Fee($)	Fee($)	Fee($)	Fee($)	Fees Paid ($)
Utility	300	150	500	250	200	100	____
Design	200	100	100	50	130	65	____
Plant	200	100	300	150	160	80	____
Reissue	300	150	500	250	600	300	____
Provisional	200	100	0	0	0	0	____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims		Extra Claims		Fee($)		Fee Paid ($)
____	-20 or HP=	____	x	____	=	____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims		Extra Claims		Fee($)		Fee Paid ($)
8	- 4(HP) =	2	x	200	=	400.00

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	
Fee ($)	Fee Paid ($)
____	____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee ($)		Fee Paid ($)
____	- 100 =	____	/ 50 =	____ (round up to a whole number)	x		=	____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	____
Other (e.g., late filing surcharge) :	____

SUBMITTED BY

Signature	Robert W. Mulcahy	Registration No. (Attorney/Agent) 26,436	Telephone 713-623-4844
Name (Print/Type)	ROBERT W. MULCAHY		Date 11/30/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

Atty. Dkt. No. APPM/008764/FEP/OXD/AG

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
Autryve, et al.

Serial No.: 10/679,189

Confirmation No.: 9509

Filed: October 3, 2003

For: Absorber Layer for DSA Processing

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§ Group Art Unit: 2823
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§ Examiner: Hsien Ming Lee
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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence and the documents referred to as attached therein are being facsimile transmitted to the U.S. Patent and Trademark Office to the fax number indicated by the Examiner, namely, fax number (571) 273-8300 to the attention of the named Examiner, on the date below.

11/30/05 _____
Date Signature

MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

SECOND RESPONSE TO FINAL OFFICE ACTION DATED SEPTEMBER 6, 2005

In response to the Final Office Action dated September 6, 2005, having a shortened statutory period for response set to expire on December 6, 2005, please enter this response and reconsider the claims pending in the application for reasons discussed below. Authorization to charge the sum of $400.00 for two additional independent claims in excess of three is given in a separate fee transmittal. The Commissioner is hereby authorized to charge counsel's Deposit Account No. 20-0782/APPM/008764/KMT for any other fees, including extension of time fees or excess claim fees, required to make this response timely and acceptable to the Office.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper. **Remarks** begin on page 7 of this paper.

12/01/2005 SSESHE1 00000010 501074 10679189

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